•								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOP Effective October 1, 2003								10/624288					
		CLAIMS AS	• Column		(Column 2)		SMAL TYPE	SMALL ENTITY TYPE		OR	NAHT REHTO YTITHE SHALL ST		
TO	TAL CLAIMS						RAT	Ε	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		•		XS	XS 9=		OR	XS18=		
INDEPENDENT CLAIMS			minus 3 =		•		X40	X43=		OR	X8 <u>6</u> ≑		
ML	ILTIPLE DEPEN	IDENT CLAIM PE	RESENT				+145=			OR	+290≃		
• 11	the difference	in column 1, is	less than zero, enter "0" in column 2				TOT	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II							SMA	.11.1	ENTITY	OR	OTHER SMALL E		
	- 	(Column 3)	5,117		ADDI-) 		ADDI-					
NT A	96314	CLAIMS REMAINING AFTER		NUM PRÉVIO PAID	DUSLY	PRESENT	RAT	E	TIONAL		RATE	TIONAL FEE	
AMENDMENT A	Total	AMENDMENT 19	Minus	-2	0	=	XS	/		OR	X\$18=		
MEN	Independent	. 2	Minus	444 0	3	=	X43	=		Off	X86=		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT C						<u> </u>	,			200		
								5=		OR	+290=		
-								FEE	L	OR	ADDIT. FEE	<u>~</u>	
	(Column 1) (Column 2) (Column 3)												
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE_		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total /	*-	Minus	**		=	х\$	9=		OR	X\$18=		
MEN	Independent	•	Minus	***		= .	X4:	3=	·	OR	X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							5=		OR	+290=		
)TAL		ł	TOTAL		
		The second of the second of the second								JOR	ADDIT. FEE	L	
	· · · · · · · · · · · · · · · · · · ·	1			,	,							
NTC		CLAIMS :REMAINING AFTER AMENDMENT		NUM PREVI	HEST 18ER OUSLY FOR	PRESENT EXTRA	RA ⁻	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
MEN	Independent		Minus	444		=	X4:	 3 =	 	OR	X86=		
Ā	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPEN					J			104		1	
								5 -		OR	+290=	<u> </u>	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL ADDIT, FEE		
.***	II the Highest Nu	mber Previously P	aid For IN TH	IS SPACE	is less tha	an 3, enter *3.*				ar ^c in c	oluma 1.		

FORM PTO-875 (Rev 10/03)

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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.